FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State
Parties must be filed electronically.

Reset Forms



2014 MAY 27 AM 7: 11

COMMITTEE NAME (Must be same as on Statement of	Organization)		
Kathy M. Christianson	FORM		
IMPORTANT: Indicate by # type of committee you are reporting (1) Statewide/Legislative/Judge Standing for Retention Candida (4) County Central Committee (5) County Candidate (6) City Subdivision Candidate (8) County PAC (9) City PAC (10) Sc 11) Local Ballot Issue	DR-2 (Rev. 12/2009) For Office Use Only Comm. # 3 253		
CANDIDATE COMMITTEES ONLY: Candidate Name Kathy M. Christianson	Political Party (if applicable) Republican District (if Senate or House)	Logged In Scanned Computer	
Office Sought Humboldt County Recorder	Audited		
Late reports are subject to possible civil and criminal penaltic candidate's committee, and the chairperson, for any other typestypestypestypestypestypestypestypes	s. Pursuant to lowa Code sections 68B.32Ale of committee, is the individual responsible SLS -890 -2154 TELEPHONE	(7) and 68A.401(3), the candidate, for a for filing timely and accurate reports.	
I AM FILING A Schedule B	REPORT FOR (1) ELECTION	(ONON ELECTION VEAD	
(report date)	Indicate by #		
CHECK IF AMENDMENT TO REPORT DATED		Local Committees, enter Date of Election	
Check if this is final (termination) report and attach Not (You must continue to file reports until a DR-3 is	tice of Dissolution Form DR-3.	County & Local Committees, enter County in which Election is held	
STATEMENT OF CASH ON H.	AND		
cash on Hand at the beginning of the reporting period. committee. This amount MUST be the same as of the last reporting period or must be zero if this	the cash on hand at the end	\$ 0.00	
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Sc	chedule A) (*also see in-kind below)		
Schedule F: Loans Received total (Attach Sche	dule F)		
Schedule H: Total Sales of Campaign Property			
(Schedule H applies to Candidates' C	Committees Only)		
	SUB-TOTAL	\$ 0.00	
SUBTRACT TOTAL MONEY SPENT THIS PER			
Schedule B: Expenditures total (Attach Schedul			
Schedule F: Loan Repayments total (Attach Sch	nedule F)		
CASH ON HAND at the end of this reporting period (if final	l report balance must be zero)	\$ 0,00	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach S	schedule E)	\$ 2.045.95	
**OUTSTANDING LOANS (From Schedule F - Attach Sch	nedule F)	\$	
CONSULTANT BREAKDOWN (Schedule G Attached?)		YESNO	
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H -	Attach Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled compains a			

OR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE	IN-KIND
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 06/97)	CONTRIBUTIONS
Kathy M, Christianson Reset Form		K THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
04/18/14	Kathy M. Christianson 105 Taft St N Humboldt, IA 50548	Candidate	Cash	\$ 340.00	
04/22/14	Kathy M. Christianson 105 Taft St N Humboldt, IA 50548	Candidate	Cash	269.90	
05/16/14	Kathy M. Christianson 105 Taft St N Humboldt, IA 50548	Candidate	Cash	243.00	
05/23/14 Kathy M. Christianson 105 Taft St N Humboldt, IA 50548	Candidate	Cash	1,193.05		
			SUB-TOTAL	2,045.95	
			TOTAL (if las page of this schedule	2,045.95	1

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column,

Page ____ | of ___ | (for Schedule E)